

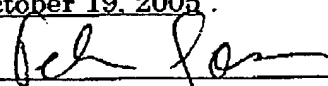
OCT 19 2005

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FACSIMILE COVER SHEET

TO: US Patent and Trademark Office FAX: 571 273 8300 Attn: Commissioner for Patents MAIL STOP: Non-Fee Amendments ART UNIT : 2876 Examiner: FRECH, Karl D. From: Pehr Jansson Reg. No. 35,759	Certificate of Transmission under 37 CFR 1.8 I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office (Fax No.: 571 273 8300) on <u>October 19, 2005</u> .  Pehr Jansson, Reg. No. 35,759
<u>In regard to:</u> Appl. No. : 10/035,905 Conf. No. : 2189 Applicant : Montgomery Filing Date : 12/24/2001 Docket No. : 40.0049 Customer No. : 41754	This certificate applies to the following documents transmitted herewith: <ul style="list-style-type: none"> • Certificate of Transmission/Cover Sheet (this page) • Transmittal Letter SB-21 (1 page) • Petition for Ext. of Time SB-22 & Copy (2 pages) • Credit Card Form 2038 (1 page) • Amendment & Response (15 pages)
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Total Number of Pages in This Submission

Application Number	10/035,905
Filing Date	12/24/2001
First Named Inventor	Montgomery
Art Unit	2878
Examiner Name	Frech, Karl D.
Attorney Docket Number	40.0049

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Credit Card Form 2038
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